



AF 12700
SF 5/13

**REQUEST FOR
CONTINUED EXAMINATION
(RCE)**

Application Number	09/220,724	<i>Second 5/15/03</i>
Filing Date	December 24, 1998	
First Named Inventor	Aaron ABBOTT	
Group Art Unit	2142	
Examiner Name	Beatriz PRIETO	Technology Center 2100
Attorney Docket Number	9545-013-27	

This is a Request for Continued Examination under 37 C.F.R. 1.114 of the above-identified application.

Note: If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 C.F.R. § 1.53(d) instead of a RCE to be eligible for the patent term adjustment provisions of the AIPA.

1. Submission required under 37 C.F.R. 1.114

- a. Previously submitted
 - i. Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on January 10, 2003. (Any unentered amendment(s) referred to above will be entered).
 - ii. Consider the arguments in the Appeal Brief or Reply Brief filed on _____.
 - iii. Other: _____.
- b. Enclosed
 - i. Amendment/Reply
 - ii. Information Disclosure Statement (IDS)

2. Miscellaneous

Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c)

- a. for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(i) required).
- b. Other _____.

3. Fees The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

- a. The Director is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account No. 50-1442.
 - i. RCE fee required under 37 C.F.R. 1.17(e).
 - ii. Extension of time fee (37 C.F.R. 1.136 and 1.17).
 - iii. Other _____.
- b. Check in the amount of \$1,160.00 enclosed.

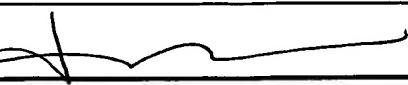
CORRESPONDENCE ADDRESS

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750.00 OP

Name:	Steven B. Kelber	Registration No.:	30,073
Signature:		Date:	May 12, 2003
Name:	Lisa K. Norton	Registration No.:	44,977



FEE TRANSMITTAL

Docket No.	9545-013-27
Serial No.	09/220,724
Filing Date	December 24, 1998
Inventor(s)	Aaron ABBOTT, et al.
Group Art Unit	2142

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MAY 14 2003

TOTAL AMOUNT OF PAYMENT

\$1,160.00

Examiner

Beatriz PRIETO

Technology Center 2100

<p>1. <input type="checkbox"/> Applicant claims small entity status.</p> <p><input checked="" type="checkbox"/> Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442.</p> <p><input type="checkbox"/> Charge the indicated fees to Deposit Account No. 50-1442.</p>								FEE CALCULATION (continued)									
								3. ADDITIONAL FEES									
								Large Entity		Small Entity		Fee Description					
<p>2. <input checked="" type="checkbox"/> Check enclosed.</p>								Fee Code	Fee (\$)	Fee Code	Fee (\$)						
<p>FEE CALCULATION</p>								1051	130	2051	65	Surcharge-late filing fee or oath					
<p>1. BASIC FILING FEE</p>								1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet					
Large Entity		Small Entity		Fee Description				1053	130	1053	130	Non-English specification					
Fee Code	Fee (\$)	Fee Code	Fee (\$)					Fee Paid	1812	2520	1812	2520	Ex parte reexam. fee				
1001	750	2001	375	Utility filing fee					1251	110	2251	55	1-mo. ext. of time				
1002	330	2002	165	Design filing fee					1252	410	2252	205	2-mo. ext. of time				
1003	520	2003	260	Plant filing fee					1253	930	2253	465	3-mo. ext. of time				
1004	750	2004	375	Reissue filing fee					1254	1450	2254	725	4-mo. ext. of time				
1005	160	2005	80	Provisional filing fee					1255	1970	2255	985	5-mo. ext. of time				
SUBTOTAL (1)					\$0.00			1401	320	2401	160	Notice of Appeal					
<p>2. EXTRA CLAIM FEES</p>								1402	320	2402	160	Appeal Brief					
tot. claims		9	-	20*	=	0	x	\$18	=	0	1403	280	2403	140	Request for Oral Hearing		
ind. claims		3	-	3*	=	0	x	\$84	=	0	1501	1300	2501	650	Utility/Reissue Issue Fee		
<input type="checkbox"/> Multiple Dependent Claims								\$280	=		1502	470	2502	235	Design Issue Fee		
Large Entity		Small Entity		Fee Description				1503	630	2503	315	Plant Issue Fee					
Fee Code	Fee (\$)	Fee Code	Fee (\$)					Fee Paid	1460	130	1460	130	Petitions to the Commissioner				
1202	18	2202	9	Claims in excess of 20					1806	180	1806	180	IDS Submission				
1201	84	2201	42	Independent claims in excess of 3					8021	40	8021	40	Assignment				
1203	280	2203	140	Multiple dependent claim, if not paid					1801	750	2801	375	For Filing RCE				
1201	84	2204	42	*Reissue independent claims over original patent					1802	900	1802	900	Expedited Design				
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent				OTHER (indicate below):									
SUBTOTAL (2)					\$0.00												
<p>* or number previously paid, if greater; For Reissues, see above</p>								SUBTOTAL (3)					\$1,160.00				

Name	Steven B. Kelber			Registration No.			30,073		
Signature				Date	May 12, 2003		Telephone	202-861-3900	
Name	Lisa K. Norton			Registration No.			44,977		